JC14 Rec'd PCT/PTO 12 MAY 2005

INFORMATION	Application Number	10/534890
	Filing Date	101324030
ISCLOSURE STATEMENT TRANSMITTAL	First Named Inventor	Francesco A. Maone
IRANSMITTAL	Group Art Unit	
oner For Patents	Examiner Name	
is a Form PTO-1449, any required copies of documents listed thereon, and any	Attorney Docket Number	CH02 0035 US

Enclosed h concise ex	erewith is a Fo planation of the	om PTO-1449, any required copies of documents listed thereon, and an air relevance is indicated below per 37 CFR 1.97.	Attorney Docket Numb	er CH02 0035 US	
		se charge any required fee under §1.17(i) or §1.17 No. 14-1270.	p) or any other require	d fee (except the issue fee) to	
1.	☐ I cert foreign a	tify that these documents were first cited in any copplication not more than three (3) months ago.	mmunication from a fe	reign Patent Office in a counterpart	
2.	 I certify that none of these documents were cited in any communication from a foreign Patent Office in a counterpart foreign application, and, to the knowledge of the undersigned after making reasonable includiry, none of these documents was known to any individual designated in §1.56(c) more than three (3) months ago. 				
	Appl pays the	icant hereby petitions under §1.97(d) that this IDS fee under §1.17(p) as indicated below, and I certif	be considered after fit 1. or 2. as indicated a	nal Action or Notice of Allowance, bove.	
	A fee	e under §1.17(p) is not required under §1.97(c), af date of application or RCE, because I certify 1. or	er the first Action on t 2. as indicated above.	ne merits and more than (3) months	
	A copin U.S. pa	py of the citations is not required because they we atent application Ser. No		, , 1	
	riling Da	terelied on for an	earner effective filing	date under 35 U.S.C. 120).	
	The concise explanation of the relevance of any non-English document, as understood by the individual designated in §1.56(c) most knowledgeable about the contents, is that the document is/was:				
	cited in the specification or considered in drafting the specification of this application;				
previously submitted or cited in the parent application (or in a related patent application Ser. No					
☐ cited as an "X" or "Y" document in a foreign Patent Office search report in a foreign counterpart application, a copy of which report is also enclosed.					
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED					
Name (Prin	т Туре)	Kevin Simons, Reg. No. 45,110			
Signature		lam on	Date (1/12/05	
CERTIFICATE OF MAILING OR TRANSMISSION					
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Name (Prin		Daniel L. Michalek		X/x	
Signature		X	Date .(12-MAY05	

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Rev. July 2004



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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

First Named Inventor: Francesco A. Maone

Docket No.: CH02 0035 US

PTO Application No.:

Conf :

Art Unit:

Date Filed:

Examiner:

Title: Adaptive hysteresis for reduced swing signalling circuits

Mail Stop DD

Commissioner for Patents

P.O. Box 1450, Alexandria, VA 22313-1450

TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT UNDER 37 CFR §1.97

Sir:

Enclosed in this transmittal is an "Information Disclosure Statement by Applicant" and a copy of each of the documents listed thereon. These documents are considered to be relevant in that they have been cited as an "X" or "Y" document in a foreign Patent Office search report on a foreign counterpart application, a copy of which report is also enclosed.

☐ I hereby certify that these documents were cited in said search report not more than three (3) months prior to the filing of this information disclosure statement.

This disclosure is not an admission that any of these documents is material to or even prior art with respect to the above-referenced application.

The Commissioner is hereby requested and authorized pursuant to 37 CFR §1.136(a)(3), to treat any concurrent or future reply in this application requiring a petition for extension of time for its timely submission, as incorporating a petition for extension of time for the appropriate length of time. Please charge any additional fees which may now or in the future be required in this application, including extension of time fees, but excluding the issue fee unless explicitly requested to do so, and credit any overpayment, to Deposit Account No. 14-1270.

USPTO Customer Number

Respectfully submitted,

USPTO Customer Number

Kevin Simons, Reg. No. 45,110 Philips Electronics North America Corp.

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(408) 474-9075

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mediting anythrologic addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 2313-1450" on the date indicated below.

(Date) 12 MAY

(Signature

Daniel L. Michalek

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INFORMATION DISCLOSURE STATEMENT BY APPLICANT

Application Number	10/534890
Filing Date	20, 227070
First Named Inventor	Francesco A. Maone
Art Unit	
Examiner Name	
Attorney Docket Number	CH02 0035 US

	U.S. PATENT DOCUMENTS				
Examiner Initials*	Cite No.1	Document Number No -Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns Lines, Where Relevan Passages or Relevant Figures Appear
/C.M./		us- 4 994 692	02-19-1991	WOLK ALAN E	
/C.M./		us- 6 356 260	4-10-1998	MONTALBO	
/C.M./		us- 4 535 294	02-22-1983	ERICKSEN ET AL	
		US-			
		US-			
		US-			

7	FOREIGN PATENT DOCUMENTS					
	Cite No.1	Document Number (ctry3-no.4-kind5, if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of cited document	Pages, Columns Lines, Where Relevant Passages or Relevant Figures Appear	Te
/C.M./		WO 00/45507	08-03-2000	BROWN, ANTHONY		П
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NON-PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No.1	Include name of the author (in capital letters), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T⁰
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^{**}EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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Examiner

Signature

/Calvin Ma/

Date

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09/12/2008

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